

Proposed Claim Amendments

Independent Claims 1, 12, and 30 have been amended. Support for the amendments are found in the Specification as filed at least in paragraphs 0005, 0035, and 0039. Claims 27-30 have been cancelled (waiting for confirmation from client).

1. (Twice Amended) A method of treating a pelvic tumor comprising:
inserting an ablation device into a pelvic region, wherein the ablation device includes at least one electrode;
positioning the at least one electrode of the ablation device within a pelvic tumor to avoid contact with normal tissue outside of the pelvic tumor;
confirming placement of the at least one electrode of the ablation device completely within the pelvic tumor with a laparoscope and an imaging device; and
delivering energy through the at least one electrode of the ablation device to the pelvic tumor to ablate the tumor.
2. The method of claim 1, wherein inserting the ablation device includes inserting the ablation device into a uterus.
3. The method of claim 2, wherein the ablation device is inserted through an abdomen and into the uterus.
4. The method of claim 2, wherein the ablation device is inserted through a cervix and into the uterus.
6. The method of claim 1, wherein the ablation device includes a plurality of deployable arms and further comprising deploying the plurality of arms completely within the pelvic tumor.
7. The method of claim 1, wherein the imaging device is an ultrasound machine.
8. The method of claim 6, further comprising inserting an ultrasound probe into an incision proximate a top of a uterus.

9. The method of claim 1, wherein delivering energy includes delivering RF energy to the pelvic tumor.
10. The method of claim 1, wherein delivering energy includes heating the pelvic tumor to a temperature between approximately 65 °C and approximately 100 °C for at least 7 minutes.
11. The method of claim 10, wherein the pelvic tumor is maintained at the temperature for between approximately 7 and approximately 14 minutes.
12. (Twice Amended) A method of treating pelvic tumors comprising:
 - providing a patient on an operating table;
 - providing at least one monitor for a laparoscope and an imaging device, the at least one monitor being located across the operating table from a surgeon and proximate the patient's waist;
 - providing an energy source and the imaging device adjacent to the at least one monitor, the energy source and the imaging device being located proximate the patient's knees;
 - inserting an ablation device into a pelvic region of the patient, wherein the ablation device includes at least one electrode;
 - positioning the at least one electrode of the ablation device within a pelvic tumor to avoid contact with normal tissue outside of the pelvic tumor;
 - confirming placement of the at least one electrode of the ablation device completely within the pelvic tumor with the laparoscope and the imaging device; and
 - delivering energy to the pelvic tumor to ablate the tumor.
13. The method of claim 12, wherein the patient is in a dorsal position on the operating table.
14. The method of claim 12, wherein inserting the ablation device includes inserting the ablation device through an abdomen and into a uterus.
15. The method of claim 12, wherein inserting the ablation device includes inserting the ablation device through a cervix and into a uterus.

16. The method of claim 14, further comprising repositioning the uterus relative to the ablation device.
17. The method of claim 14, further comprising rotating the ablation device during insertion to reduce movement of the uterus.
19. The method of claim 1, wherein the ablation device includes a plurality of deployable arms and further comprising deploying the plurality of arms of the ablation device completely within the pelvic tumor.
20. The method of claim 12, wherein the imaging device is an ultrasound machine.
21. The method of claim 14, further comprising inserting an ultrasound probe into an incision proximate a top of the uterus.
22. The method of claim 12, wherein delivering energy includes delivering RF energy to the pelvic tumor.
23. The method of claim 12, wherein delivering energy includes heating the pelvic tumor to a temperature between approximately 65 °C and approximately 100 °C for at least 7 minutes.
24. The method of claim 12, further comprising removing the ablation device from the pelvic region, including cauterizing a track of the ablation device.
25. The method of claim 11, further comprising:
repositioning the ablation device proximate a second pelvic tumor;
confirming placement of the ablation device; and
delivering energy to the second pelvic tumor to ablate the second tumor.
26. The method of claim 25, wherein the second pelvic tumor is located closer to a vasculature than a first pelvic tumor.
27. (Cancelled) A surgical system for ablating pelvic tumors in a patient, the system comprising:

an ablation device for insertion into a pelvic region of a patient, wherein the ablation device includes at least one electrode;

an energy source coupled to the ablation device for providing energy to the ablation device;

a laparoscope for insertion of the at least one electrode within a pelvic tumor of the patient; and

an imaging device for observing a location of the at least one electrode of the ablation device completely within the pelvic tumor of the patient,

wherein the laparoscope and the imaging device are connected to at least one monitor, the at least one monitor being located along a first side of an operating table, and wherein the energy source and the imaging device are located adjacent the at least one monitor along the first side of the operating table.

28. (Cancelled) The surgical system of claim 27, wherein the imaging device is an ultrasound machine.

29. (Cancelled) The surgical system of claim 27, wherein the energy source is an RF energy source.

30. (Twice amended) A method of treating pelvic tumors comprising:
 inserting an ablation device including at least one electrode into a puncture site in a pelvic region, the puncture site being approximately 1 mm to 2 mm in diameter;
 positioning the at least one electrode of the ablation device within at least one pelvic tumor to avoid contact with normal tissue outside of the at least one pelvic tumor, the at least one pelvic tumor having a diameter of at least 1 cm;
 confirming placement of the at least one electrode of the ablation device completely within the at least one pelvic tumor with a laparoscope and an imaging device;
 delivering RF energy to the ablation device; and
 heating the at least one pelvic tumor to a temperature between approximately 85 °C and approximately 100 °C for between approximately 7 and 14 minutes,
 wherein from the puncture site substantially all of the at least one pelvic tumor is ablated.